



COCHISE COUNTY COMMUNITY DEVELOPMENT

"Public Programs...Personal Service"

COCHISE COUNTY

MAY 07 2015

PLANNING

COCHISE COUNTY REZONING APPLICATION

Submit to: Cochise County Community Development Department
1415 Melody Lane, Building E, Bisbee, Arizona 85603

1. Applicant's Name: Klump Ranches LLC
2. Mailing Address: P.O. Box 448
Bowie AZ 85605
City State Zip Code
3. Telephone Number of Applicant: (520) 507-5118 MATT Klump
4. Telephone Number of Contact Person if Different: ()
5. Email Address: klump ranches@gmail.com
6. Assessor's Tax Parcel Number: 203-12-015 (Can be obtained from your County property tax statement)
7. Applicant is (check one):
 - Sole owner: ☒
 - Joint Owner: _____ (See number 8)
 - Designated Agent of Owner: _____
 - If not one of the above, explain interest in rezoning: _____
7. If applicant is **not** sole owner, attach a list of all owners of property proposed for rezoning by parcel number. Include all real parties in interest, such as beneficiaries of trusts, and specify if owner is an individual, a partnership, or a corporation:
 - List attached (if applicable): _____
8. If applicant is **not** sole owner, indicate which **notarized** proof of agency is attached:
 - If corporation, corporate resolution designating applicant to act as agent: _____
 - If partnership, written authorization from partner: _____
 - If designated agent, attach a **notarized** letter from the property owner(s) authorizing representation as agent for this application.

9. Attach a proof of ownership for all property proposed for rezoning. Check which proof of ownership is attached:

- Copy of deed of ownership: _____
- Copy of title report: _____
- Copy of tax notice: _____
- Other, list: Property Profile

10. Will approval of the rezoning result in more than one zoning district on any tax parcel?

- Yes _____ No X

11. If property is a new split, or the rezoning request results in more than one zoning district on any tax parcel then a copy of a survey and associated legal description stamped by a surveyor or engineer licensed by the State of Arizona must be attached.

12. Is more than one parcel contained within the area to be rezoned? Yes _____ No X

- If yes and more than one property owner is involved, have all property owners sign the attached consent signature form.

13. Indicate existing Zoning District for Property: SR-8

14. Indicate proposed Zoning District for Property: LI

Note: A copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached. Review this criteria and supply all information that applies to your rezoning. Feel free to call the Planning Department with questions regarding what information is applicable.

15. Comprehensive Plan Category: B (A County planner can provide this information.)

16. Comprehensive Plan Designation or Community Plan: Develop (A County planner can provide this information.)

Note: in some instances a Plan Amendment might be required before the rezoning can be processed. Reference the attached rezoning criteria, Section A.

17. Describe all structures already existing on the property: Windmill

18. List all proposed uses and structures which would be established if the zoning change is approved. Be complete. Please attach a site plan: _____

Marble Processing Plant

19. Are there any deed restrictions or private covenants in effect for this property?

- No X Yes _____
- If yes, is the proposed zoning district compatible with all applicable deed restrictions/private covenants? Yes _____ No _____
- Provide a copy of the applicable restrictions (these can be obtained from the Recorder's office using the recordation Docket number)

20. Which streets or easements will be used for traffic entering and exiting the property?

Haskell Ave.

21. What off-site improvements are proposed for streets or easements used by traffic that will be generated by this rezoning? ADOT Approach

22. How many driveway cuts do you propose to the streets or easements used by traffic that will be generated by this rezoning? 1

23. Identify how the following services will be provided:

Service	Utility Company/Service Provider	Provisions to be made
Water	<u>Self</u>	
Sewer/Septic	<u>Self</u>	
Electricity	<u>SSVEC</u>	
Natural Gas	<u>SW Gas</u>	
Telephone	<u>Century Link</u>	
Fire Protection	<u>Self</u>	

24. This section provides an opportunity for you to explain the reasons why you consider the rezoning to be appropriate at this location. The attached copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached for your reference (attach additional pages as needed).

This location is next to a concrete batch plant
which is similar in use. It is along a business
loop that is used for similar purposes.

25. AFFIDAVIT

I, the undersigned, do hereby file with the Cochise County Planning Commission this petition for rezoning. I certify that, to the best of my knowledge, all the information submitted herein and in the attachments is correct. I hereby authorize the Cochise County Planning Department staff to enter the property herein described for the purpose of conducting a field visit.

Applicant's Signature:  for Klump Ranches LLC.

Date: 4/29/15



Mail:
P.O. Box 448
Bowie, AZ 85605

(520)-384-3622
(520)-384-3622(fax)
klumpranches@gmail.com

Office:
920 S. Haskell
Willcox, Az. 85643

May 4, 2015

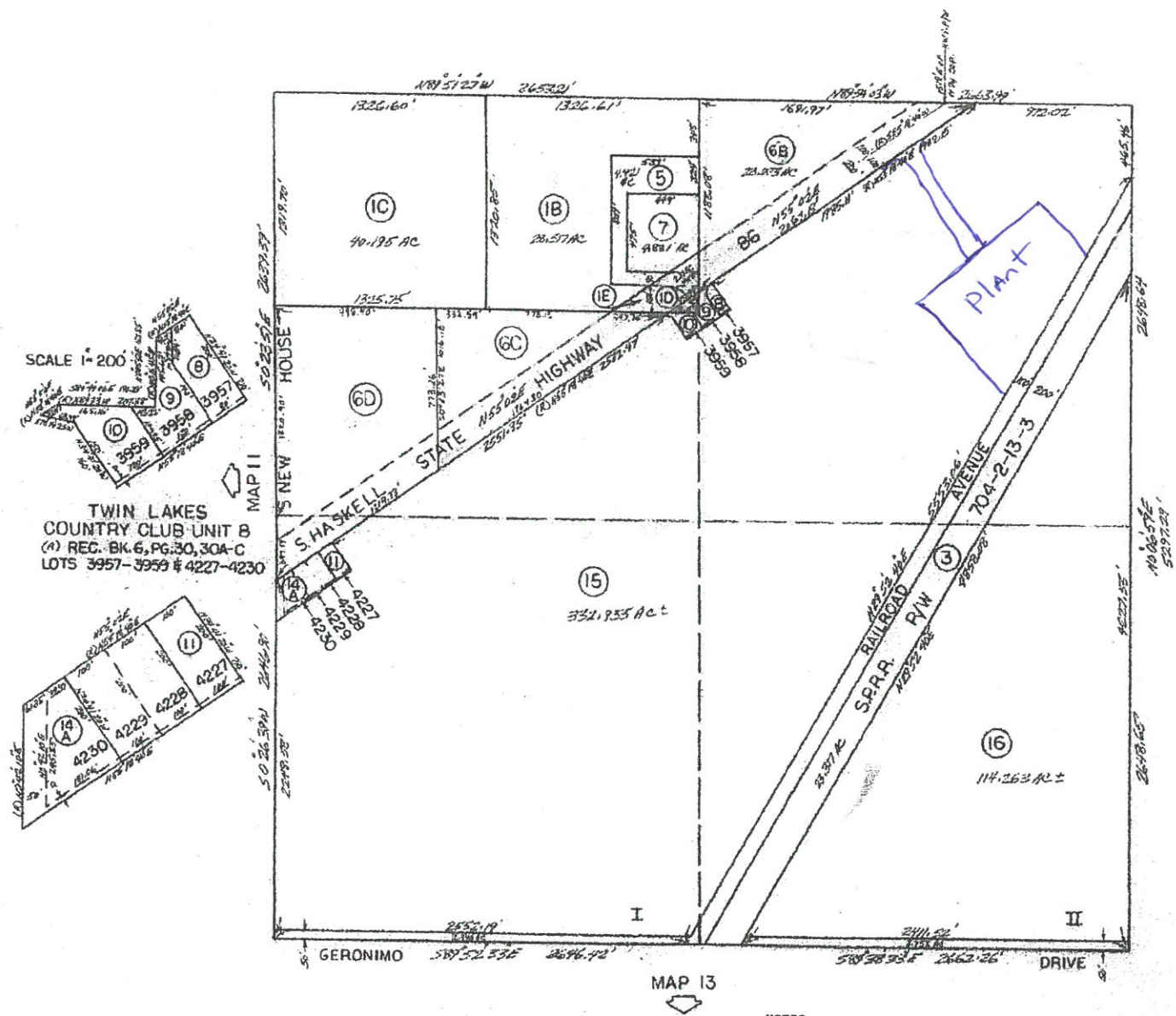
Dear Neighbor,

This letter is to inform you of our plans to re-zone Parcel Number 203-12-015, located just south of Willcox, AZ, along the business loop. We are doing this in anticipation of building a Marble Processing Plant. We do not foresee any negative effects on our neighbors, but would like to give you the opportunity to express your concerns, if any. We can be reached at the above mailing address.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matt Klump", is written over the printed name. The signature is stylized with a large, sweeping loop at the end.

Matt Klump



Special Use Docket Z-15-04 (Klump)

X

YES, I SUPPORT THIS REQUEST

Please state your reasons:

Brings Jobs To The Area. Only concern is
treatment of water. Water from the storm gutters of
Delashie. Water structure studies on the effects
of traffic and road usage.

NO, I DO NOT SUPPORT THIS REQUEST:

Please state your reasons:

(Attach additional sheets, if necessary)

PRINT NAME(S):

DOUGLAS GRASHER

SIGNATURE(S):

Douglas W. Grasher

YOUR TAX PARCEL NUMBER:

lot # 6289

Turn Lake County Clerk Unit 12

(the eight-digit identification number found on the tax statement from the Assessor's Office)

Your comments will be made available to the Planning Commission. Submission of this form or any other correspondence becomes part of the public record and is available for review by the applicant or other members of the public. Written comments must be received no later than 4 PM on Wednesday, June 24, 2015 to be included in the staff report to the Commission in order for them to consider the comments before the meeting. We cannot make exceptions to this deadline; however, if you miss the written comment deadline for the staff report you may still mail or send email comments to Peter Gardner at pgardner@cochise.az.gov that must be received by July 7, 2015 to have your support or non-support noted verbally noted at the meeting. You may also personally make a statement at the **public hearing on July 8, 2015**. NOTE: Please do not ask the Commissioners to accept written comments or petitions at the meeting; your cooperation is greatly appreciated.

RETURN TO:

Peter Gardner, Planner I
Cochise County Planning Department
1415 Melody Lane, Building E
Bisbee, AZ 85603

Special Use Docket Z-15-04 (Klump)



YES, I SUPPORT THIS REQUEST

Please state your reasons:

☐ **NO, I DO NOT SUPPORT THIS REQUEST:**

Please state your reasons:

(Attach additional sheets, if necessary)

PRINT NAME(S): DOMINICK LOGALBO, COURTS OF PRAISE UPC

SIGNATURE(S):

Dominick Logalbo

YOUR TAX PARCEL NUMBER: 203-11-054 (the eight-digit identification number found on the tax statement from the Assessor's Office)

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☒ **YES, I SUPPORT THIS REQUEST**

Please state your reasons:

Helps with future development.

☐ **NO, I DO NOT SUPPORT THIS REQUEST:**

Please state your reasons:

(Attach additional sheets, if necessary)

PRINT NAME(S):

ALBERT GOH

SIGNATURE(S):

[Signature]

YOUR TAX PARCEL NUMBER: 203-11-069 5 (the eight-digit identification number found on the tax statement from the Assessor's Office)

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